

County: Taylor
RIB LAKE HEALTH CARE CENTER
650 PEARL STREET, PO BOX 308
RIB LAKE 54470 Phone: (715) 427-5291
Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/00): 79
Total Licensed Bed Capacity (12/31/00): 100
Number of Residents on 12/31/00: 75

Facility ID: 3820

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Ownership:
Highest Level License:
Operate in Conjunction with CBRF?
Title 18 (Medicare) Certified?
Average Daily Census:

Corporation
Skilled
No
Yes
71

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/00)				Length of Stay (12/31/00)	
		Primary Diagnosis	%	Age Groups	%		%
Home Health Care	No					Less Than 1 Year	29.3
Supp. Home Care-Personal Care	No					1 - 4 Years	38.7
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	9.3	More Than 4 Years	32.0
Day Services	No	Mental Illness (Org./Psy)	22.7	65 - 74	14.7		
Respite Care	Yes	Mental Illness (Other)	0.0	75 - 84	29.3		100.0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	41.3	*****	
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	5.3	Full-Time Equivalent	
Congregate Meals	Yes	Cancer	0.0			Nursing Staff per 100 Residents	
Home Delivered Meals	Yes	Fractures	4.0		100.0	(12/31/00)	
Other Meals	No	Cardiovascular	14.7	65 & Over	90.7		
Transportation	No	Cerebrovascular	38.7			RNs	16.2
Referral Service	No	Diabetes	6.7	Sex	%	LPNs	1.4
Other Services	Yes	Respiratory	4.0			Nursing Assistants	
Provide Day Programming for		Other Medical Conditions	9.3	Male	34.7	Aides & Orderlies	
Mentally Ill	No			Female	65.3		29.2
Provide Day Programming for			100.0				
Developmentally Disabled	No				100.0		

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other			Private Pay			Managed Care			Total No.	Percent Of All Residents
	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate	No.	%	Per Diem Rate		
Int. Skilled Care	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Skilled Care	8	100.0	\$224.00	58	93.5	\$88.06	1	100.0	\$92.98	4	100.0	\$124.19	0	0.0	\$0.00	71	94.7%
Intermediate	---	---	---	4	6.5	\$74.21	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	4	5.3%
Limited Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Disabled	---	---	---	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj.	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependent	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	8	100.0		62	100.0		1	100.0		4	100.0		0	0.0		75	100.0%

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00				
		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Percent Admissions from:						
Private Home/No Home Health	11.4	Bathing	1.3	64.0	34.7	75
Private Home/With Home Health	6.8	Dressing	14.7	52.0	33.3	75
Other Nursing Homes	4.5	Transferring	28.0	50.7	21.3	75
Acute Care Hospitals	77.3	Toilet Use	26.7	45.3	28.0	75
Psych. Hosp. -MR/DD Facilities	0.0	Eating	70.7	17.3	12.0	75
Rehabilitation Hospitals	0.0	*****				
Other Locations	0.0	Continence		%	Special Treatments	%
Total Number of Admissions	44	Indwelling Or External Catheter	4.0		Receiving Respiratory Care	6.7
Percent Discharges To:		Occ/Freq. Incontinent of Bladder	61.3		Receiving Tracheostomy Care	0.0
Private Home/No Home Health	9.1	Occ/Freq. Incontinent of Bowel	22.7		Receiving Suctioning	0.0
Private Home/With Home Health	34.1				Receiving Ostomy Care	1.3
Other Nursing Homes	9.1	Mobility			Receiving Tube Feeding	6.7
Acute Care Hospitals	9.1	Physically Restrained	5.3		Receiving Mechanically Altered Diets	20.0
Psych. Hosp. -MR/DD Facilities	0.0				Other Resident Characteristics	
Rehabilitation Hospitals	0.0	Skin Care			Have Advance Directives	85.3
Other Locations	2.3	With Pressure Sores	5.3		Medications	
Deaths	36.4	With Rashes	5.3		Receiving Psychoactive Drugs	60.0
Total Number of Discharges (Including Deaths)	44	*****				

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	Ownership:		Bed Size:		Licensure:		All	
	This Facility	Peer Group	100-199	Peer Group	Skilled	Peer Group	Facilities	Ratio
	%	%	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	71.0	80.4	0.88	82.6	84.1	0.84	84.5	0.84
Current Residents from In-County	58.7	74.2	0.79	79.7	76.2	0.77	77.5	0.76
Admissions from In-County, Still Residing	25.0	19.0	1.32	22.3	22.2	1.13	21.5	1.16
Admissions/Average Daily Census	62.0	135.3	0.46	126.4	112.3	0.55	124.3	0.50
Discharges/Average Daily Census	62.0	137.7	0.45	127.9	112.8	0.55	126.1	0.49
Discharges To Private Residence/Average Daily Census	26.8	57.0	0.47	52.7	44.1	0.61	49.9	0.54
Residents Receiving Skilled Care	94.7	89.4	1.06	89.2	89.6	1.06	83.3	1.14
Residents Aged 65 and Older	90.7	95.9	0.95	95.1	94.3	0.96	87.7	1.03
Title 19 (Medicaid) Funded Residents	82.7	71.6	1.16	70.7	70.1	1.18	69.0	1.20
Private Pay Funded Residents	5.3	19.0	0.28	19.5	21.4	0.25	22.6	0.24
Developmentally Disabled Residents	0.0	1.2	0.00	0.9	0.9	0.00	7.6	0.00
Mentally Ill Residents	22.7	35.9	0.63	36.3	39.6	0.57	33.3	0.68
General Medical Service Residents	9.3	18.2	0.51	19.1	17.0	0.55	18.4	0.51
Impaired ADL (Mean)	49.1	47.3	1.04	48.4	48.2	1.02	49.4	0.99
Psychological Problems	60.0	45.0	1.33	49.3	50.8	1.18	50.1	1.20
Nursing Care Required (Mean)	5.7	6.7	0.84	6.5	6.7	0.84	7.2	0.79